Title	New and Revised Governmental and Family Law Forms for Initiating and Processing Child Support Cases (revise forms 1298.09, 1299.01 and 1299.04; approve forms 1285.66 and 1296.32; and adopt form 1299.02)	
Summary	e proposed revised forms would reflect minor changes such as lacing all references to "district attorney" with "local child support ency." The proposed new forms would expedite entry of orders after uring (including orders regarding contempt) and create a specialized ice and acknowledgment of receipt for governmental forms.	
Source	Family and Juvenile Law Advisory Committee	
Staff	Michael Wright, 415-865-7619 Ruth McCreight, 415-865-7666	
Discussion	Notice of Motion (Governmental) (form 1298.09) would be revised to add "Other Parent" to the caption, replace references to "blood testing" with "genetic testing," and add an order shortening time.	
	Summons and Complaint or Supplemental Complaint Regarding Parental Obligations (Governmental) (form 1299.01) would be revised to replace all references to "district attorney" with "local child support agency," replace references to "blood testing" with "genetic testing," and update code references. The Statement of Rights and Responsibilities would also be modified to include situations in which the father has applied for the services of the local child support agency in order to obtain a paternity judgment.	
	Answer to Complaint or Supplemental Complaint Regarding Parental Obligations (Governmental) (form 1299.04) would be revised to replace all references to "district attorney" with "local child support agency," replace references to "blood testing" with "genetic testing," and update code references.	
	Findings and Order After Contempt Hearing (Family Law—Domestic Violence Prevention—Uniform Parentage—Governmental) (form 1285.66) would be approved to accompany the Order to Show Cause and Affidavit for Contempt (form 1285.60). This new form is designed for any kind of family law—related or governmental contempt proceeding. As more courts automate the generation of orders in the courtroom, this form would facilitate the preparation and filing of an order in the courtroom at the time of the hearing.	
	Short Form Order After Hearing (Governmental) (form 1296.32)	

would be approved to provide a simplified order after hearing for cases that have been continued for further hearing. The form would provide for interim orders for health insurance coverage and modifications of child support pending further hearing.

Governmental Notice and Acknowledgment of Receipt (form 1299.02) would be adopted to provide a specialized notice and acknowledgment for governmental actions.

Attachments

GOVERNMENTAL AGENCY APPEARING PURSUANT TO WIC Sections 11475.1 and 11478.2: TELEPHONE NO.:	FOR COURT USE ONLY		
<u> </u>			
SUPERIOR COURT OF CALIFORNIA, COUNTY OF			
STREET ADDRESS:			
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
PETITIONER/PLAINTIFF:	DRAFT-3		
RESPONDENT/DEFENDANT:			
OTHER PARENT:	0.405.1444950		
NOTICE OF MOTION JUDGMENT MODIFICATION	CASE NUMBER:		
Support Health Care			
Other:			
. = 2 /			
 TO (name): READ THE ATTACHED REQUEST FORM. A hearing on the motion for the relief req 	uested will be held as follows:		
a. Date: Time: Dept.:	Rm.:		
b. Address of court same as noted above other (specify):			
3. Supporting attachments:			
	ic Testing (If you ignore this order, you		
Declaration and blank Response may be found to be the parent.)			
b. Financial Information and blank Income e. Other (specify):			
and Expense Declaration			
c. Points and Authorities			
4. NOTICE: IF YOU WISH TO HAVE A TRIAL, YOU MUST APPEAR AT THE HEA	RING ON THIS REQUEST.		
Date:			
•			
(TYPE OR PRINT NAME)	(SIGNATURE OF ATTORNEY)		
	(GIGHATORE OF ATTORNET)		
ORDER			
IT IS ORDERED THAT			
5. Time for service hearing is shortened. Service shall be on or before (date):			
6. And responsive declaration shall be received on or before (date):			
7. Other (specify):			
Date			
Date:			
)			
- (JUDI	CIAL OFFICER OF THE SUPERIOR COURT)		

PETITIONER/PLAINTIFF:	CASE NUMBER:		
RESPONDENT/DEFENDANT:			
OTHER PARENT:			
Notice: Child support is based on your ability to pay, which may be based on your income, earning capacity, and lifestyle. The amount of child support can be large and can continue until the children reach age 19. You should give the court information about your income and expenses. If you do not, the support order will be based on other information given to the court.			
You do not have to pay any fee to file your response (form 1298.05) and your completed <i>Income and Expense Declaration</i> (form 1285.50). <i>In the absence of an order shortening time,</i> you must file any documents with the court and mail copies (at least 10 court days before the hearing date) to the local child support agency at the following address:			
PROOF OF SERVICE BY MAIL			
 I am over the age of 18, not a party to this cause, and a resident of or employed in the My residence or business address is: 	e county where the mailing took place.		
3. I served a copy of this motion by enclosing it in a sealed envelope and depositing the envelope directly in the United States mail with postage paid OR at my place of business for same-day collection and mailing with the United States mail, following our ordinary business practices with which I am readily familiar. a. Date of deposit: b. Place of deposit (city and state): c. Addressed as follows:			
4. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
Date:			
(SIGNATURE) (SIGNATURE)	RE OF PERSON COMPLETING THIS FORM)		

GOVERNMENTAL AGENCY (p	ursuant to Welf. & Inst. Code, §§ 11475.1, 11478.2):	FOR COURT USE ONLY
_		
TELEPHONE NO.:	FAX NO.:	
ATTORNEY FOR (Name):		
SUPERIOR COURT OF	CALIFORNIA, COUNTY OF	
STREET ADDRESS:		
MAILING ADDRESS:		DRAFT-4
CITY AND ZIP CODE:		
BRANCH NAME:		
PETITIONER/PLA		
OTHER P.	ARENT:	
SUMMONS AND AME	COMPLAINT SUPPLEMENTAL COMPLAINT NDED COMPLAINT REGARDING PARENTAL OBLIGATIONS	CASE NUMBER:
TO (name):		
The local child support child named in this com <i>Parental Obligations</i> (for stated in item 6, orders <i>Answer</i> form with the control of the proposed that the proposed that the control of the proposed that the pr	agency has filed this lawsuit against you. This lawsuit says you and to applaint and that one of you may be required to pay child support. The sorm 1299.13) names you and the other parent as parents of each child you to pay support for these children. If you disagree with the propose your clerk within 30 days of the date that you were served with the disagreent will become final a final determination of parentage. It taken from your pay or other property without further notice. Some information.	attached proposed Judgment Regarding d listed below and, if there is an amount ed Judgment, you must file the attached is Complaint. If you do not file an f you are required to pay child support,
The local child support Name	oort agency is asking the court to issue judgments or orders for these Date of Establish Establish Establish Birth Parentage Supp	lish Modify Beginning
Additional chil	dren are listed on a page (labeled Attachment 1) attached to this com	plaint.
2. a. The parents of t	he children named in item 1 are Mother (name):	
b. Defendant	Father (name): Other parent is named as the father of the children listed on file with	ed in item 1 in the declaration of paternity
(1) (2) c A <i>Voluntar</i> Services.	County local child support agency. County welfare department. The properties of Paternity signed by mother and father is on file with the control of the county welfare.	he California Department of Child Support
	e parent asked to pay support) is the Petitioner/Plaintiff Other parent	Respondent/Defendant
3. a. Some or a (specify):	Il of the children named in item 1 are receiving or have received public	c assistance from the following counties
b. Date public 4. Other (specify):	c assistance first paid:	
	Notice to person served: You are served 1. as an individual defendant. 2. on behalf of a minor child or children. 3. other (specify):	
	Date: Clerk, by	, Deputy

PETITIONER/PLAINTIFF:	CASE NUMBER:		
RESPONDENT/DEFENDANT:			
OTHER PARENT:			
THE LOCAL CHILD SUPPORT AGENCY REQUESTS			
5. That the court determine that the persons listed in item 2 are the parents of the child	dren listed on page one.		
That, based on the California support guideline, the court order the Obligor to pay: a. \(\) \$ current monthly child support based on the Obligor's known income of \$ per month, and, if applicable, the Obligee's known income of \$ per month. b. \(\) \$ current monthly child support based on the Obligor's presumed income, as provided by law. c. \(\) \$ additional monthly child support for the following reasons (specify):			
d. \$\square\$ specified in it which this complaint is filed for the following children (specify):	em 1 through the end of the month in		
7. Other (specify):			
8. That the court order the Obligor to provide health insurance for each child named in item 1 and to complete the attached health insurance form and immediately return it to the office of the local child support agency at the address printed in the top left corner of page one, and that a Health Insurance Coverage Assignment Order be issued. NOTICE: Your employer will be ordered to enroll the children in an appropriate health insurance plan if you are found to be the parent. (Fam. Code, § 3761.)			
9. That a wage and earnings assignment be ordered.			
10. That the court order the parents to complete a <i>Child Support Case Registry Form</i> (form 1285.92) and send (deliver or mail) it to the district attorney within 10 days.			
11. That the court order the Obligor to make all payments to (specify):			
This case may be referred to a court commissioner for hearing. By law, court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. The court commissioner in your case will act as a temporary judge unless, <i>before the hearing</i> , you or any other party objects to the commissioner's acting as a temporary judge. The court commissioner may still hear your case to make findings and recommendations to a judge about your case. However, if you object to the commissioner's acting as a temporary judge, an order will not be made until a judge reviews your case.			
Date:			
	ATTORNEY BY PROSECUTING ATTORNEY)		
NOTICE			
IF YOU WANT LEGAL ADVICE, CONTACT A LAWYER II			
A Statement of Rights is attached to this document. Please read it carefully.			

(Continued on page three)

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT:	
STATEMENT OF RIGHTS A	AND RESPONSIBILITIES
NOTICE TO BOTH PARENTS (applies only if checked) The local child support agency has sued both of you to determine whether you are the parents of the child(ren) listed and if one or both of you should be ordered to pay child support. The local child support agency does not represent any individual in this	You have the right to be represented by a lawyer. If you dispute that you are the parent of the child(ren) listed in the complaint, and you do not have enough money for a lawyer, you may ask the court to appoint a lawyer to represent you on the issue of paternity. You must file your answer form with the court clerk within 30 days of the date you were served with the complaint, whether
lawsuit, including either parent or the children. Carefully read this statement and the other papers that you received.	or not you obtain an attorney. Other information about court–appointed lawyers (specify):
A blank Answer to Complaint or Supplemental Complaint Regarding Parental Obligation (form 1299.04) is included in the papers that were served on you. If you did not receive this answer form or if you would like another copy, you may get one from the local child support agency, the court clerk's office, or the Family Law Facilitator. The Family Law Facilitator can also help you to fill out the answer.	A blank answer form is included in the papers
If you file your answer form, you have the right to a court hearing, to ask questions of any witness against you, to subpoena witnesses, and to present evidence on your behalf. If you deny that you or the other parent is/are the parent(s) of the child(ren), you may be scheduled for parentage	that were served on you. If you did not receive an answer form or if you would like another copy, you may get one from the local child support agency, the court clerk's office, or the Family Law Facilitator. The Family Law Facilitator can also help you to fill out the answer.
genetic tests. If you are the parent requesting genetic tests and you refuse to submit to the testing, the court may determine the parentage issue as plead in the complaint. If you requested the test and the results of the test are consistent with the pleading, the court may order you to pay for the tests.	You may contact the local child support agency to try to work out an agreement. However, you must still file an answer form within 30 days. If you and the local child support agency can agree regarding the requests made in the complaint, you may sign a settlement agreement called a STIPULATION. By signing a stipulation you are
NOTICE TO THE PARENT ASKED TO PAY SUPPORT (OBLIGOR) The local child support agency has brought an action to determine whether you are the parent and must pay child support. The local child support agency does not represent any individual in this lawsuit,	agreeing to give up your rights explained in this statement, and you are agreeing to the following: (1) you are the parent of the child(ren) listed in the complaint; (2) you are obligated to pay support as stated in the stipulation; (3) you agree to all of the terms of the stipulation; and (4) the court will order you to obey the stipulation without further notice.

that you received.

including the other parent, the children, or you. Carefully read this statement and the other papers

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT:	

All orders for support must contain a provision for a wage and earnings assignment. This assignment will require your employer or other payor to deduct support payments from your salary or earnings and send the payments to the local child support agency. Your employer may also be required to enroll your children in a health insurance plan and deduct the cost from your salary or earnings.

If you file your answer, you have the right to a court hearing, to ask questions of any witness against you, to subpoena witnesses, and to present evidence on your behalf. You also have the right to ask the court to decide how much you will pay for support under the California guideline. If you deny that you are the parent of the child(ren), you may be scheduled for parentage genetic tests. If you refuse to submit to the testing, the court may determine that you are the parent anyway. If you are determined to be the parent, the court may order you to pay for the tests.

Any amounts you owe from a prior time may be collected from any of your property, whether or not you are current in your installment payments. Collection may be made by taking money owed to you by the state or federal government (such as tax refunds, unemployment and disability benefits, and lottery winnings), by taking property you own, by placing a lien on your property, or by any other lawful means. You may be fined or imprisoned if you fail to pay support as ordered.

NOTICE TO THE "OTHER PARENT"

The local child support agency does not represent any individual in this lawsuit, including you.

(1) If you are the custodial parent and have requested or are receiving services from the local child support agency, you will become a party to the lawsuit filed by the local child support agency after the initial support order, or an order for medical support only, is entered by the court. You and the other parent may then raise issues concerning support,

custody, visitation, and restraining orders (domestic violence). You may not raise any other issue in this action. Once you become a party, you can go to court to modify your court order, but you must first properly notify the local child support agency and give the local child support agency 30 days to tell you that you cannot file your own enforcement action because the local child support agency is actually taking steps to enforce your order. If the local child support agency does not respond to your notice within 30 days or if the local child support agency notifies you that you can proceed, you may then file your own enforcement action as long as all support is paid through the local child support agency.

You should tell the local child support agency everything you know about the Obligor's earnings and assets. If you receive welfare, the local child support agency may agree to settle any parentage or support issues in this lawsuit without letting you know in advance. If you do not receive welfare, the local child support agency cannot settle any support issue without your consent. The local child support agency also cannot negotiate, settle, or contest any issues of custody, visitation, or restraining orders.

(2) If you are the non custodial parent and have requested or are receiving services from the local child support agency, you are being sued as a party to determine your parental relationship and obligation to pay child support.

If the local child support agency does not know how much money the parent asked to pay support (Obligor) earns, he or she is presumed to earn enough money to pay the amounts stated in item 6 of the proposed judgment.

This case may be referred to a court commissioner for hearing. By law, court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. The

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT:	

court commissioner in your case *will* act as a temporary judge unless, *before the hearing*, you or any other party objects to the commissioner's acting as a temporary judge. The court commissioner may still hear your case to make findings and recommendations to a judge about your case. However, if you object to the commissioner's acting as a temporary judge, an order will not be made until a judge reviews your case.

You can object to the commissioner's acting as a temporary judge in two ways: (1) by telling the commissioner in court at the start of your hearing or (2) by delivering a written objection to the court clerk. You must object **before** the hearing in your case begins. You do not have to give a reason for your objection.

The local child support agency is required, under section 466(a)(13) of the Social Security Act, to place in the records pertaining to child support the social security number of any individual who is subject to a divorce decree, support order, or paternity determination or acknowledgement. This information is mandatory and will be kept on file at the local child support agency.

The proposed judgment will be entered against you unless you file your written Answer to Complaint or Supplemental Complaint Regarding Parental Obligation (form 1299.04) with the court clerk within 30 days of the date you were served with the complaint. The proposed judgment will be entered whether or not you have a lawyer. If you were served with a form telling you the date of a court hearing, you should go to court on that date. An order may be entered without your input if you do not attend the hearing.

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and address):	FOR COURT USE ONLY
	1 3N 333 332 3NZ1
 	
TELEPHONE NO. (Optional): FAX NO. (Optional):	
E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	DRAFT-3
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT:	
OTHER DARENT.	
OTHER PARENT:	CACE NUMBER
ANSWER TO COMPLAINT OR SUPPLEMENTAL COMPLAINT	CASE NUMBER:
REGARDING PARENTAL OBLIGATIONS	
YOU MUST FILE THIS ANSWER WITH THE COURT IF YOU WISH	TO OPPOSE THE LAWSUIT
If you disagree with the proposed judgment attached to the Complaint, you m	ust file this Answer with the court
clerk within 30 days of the date you were served with the Complaint. File t	he original <i>Answer</i> with the court
clerk at the address for the superior court stated above, and serve a copy of	on the local child support agency.
Keep a copy for your records.	
1. PARENTAGE. I and the other parent named are the parents of the following children:	
Name of child	Date of Birth
Yes No	
Additional children are listed on a page attached to this <i>Answer</i> .	
2. I request that a genetic test to determine parentage be done for all children for whom I h	ave checked a "No" box above. I
understand that the local child support agency will pay for the cost of the testing now, but	it that I may have to repay those costs if
the court decides that we are the parents.	
a CUIII D CUIDDODT	
3. CHILD SUPPORT	
a. I agree to pay support as stated in the proposed judgment.	- 5 / // // 1005 50)
b. I disagree with the support requested. Attached is my completed <i>Income and I</i>	
Financial Statement (Simplified) (form 1285.52). NOTE: You can file this answ	
4	
4. I disagree with the proposed judgment for the following reasons (specify):	
4. I disagree with the proposed judgment for the following reasons (specify):	
4. I disagree with the proposed judgment for the following reasons (specify):	
4. I disagree with the proposed judgment for the following reasons (specify):	
4. I disagree with the proposed judgment for the following reasons (specify):	
 4. I disagree with the proposed judgment for the following reasons (specify): 5. I am requesting a court hearing. 	

PETITIONER/PLAINTIFF:	CASE NUMBER:	
RESPONDENT/DEFENDANT:		
OTHER PARENT:		
6. My address and telephone number for receipt of all notices and court dates until the local child support agency are as follows: Address: City and ZIP code: Home telephone: Work telephone:	I file a change with the court and with	
I declare under penalty of perjury under the laws of the State of California that the foregoing	g is true and correct.	
Date:		
•		
(TYPE OR PRINT NAME)	(SIGNATURE OF DECLARANT)	
PROOF OF SERVICE 7. I served this answer and any other forms filed with it on the local child support agency a. Personal delivery. I personally delivered this answer to an employee of the		
(1) Name of employee:		
(2) Address where delivered:		
(3) Date of delivery:(4) Time of delivery:		
 b. Mail. I deposited this answer in the United States mail, in a sealed envelope with postage fully prepaid. I used first-climail. The envelope was addressed and mailed as follows: (1) Name: (2) Address: 		
I declare under penalty of perjury under the laws of the State of California that the foregoin	g is true and correct.	
Date:		
(TYPE OR PRINT NAME) (SIGNAT	URE OF PERSON WHO SERVED ANSWER)	

This case may be referred to a court commissioner for hearing. By law, court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. The court commissioner in your case will act as a temporary judge unless, before the hearing, you or any other party objects to the commissioner acting as a temporary judge. The court commissioner may still hear your case to make findings and recommendations to a judge. However, if you object to the commissioner acting as a temporary judge, an order will not be made until a judge reviews your case.

(Continued on page three)

INFORMATION SHEET FOR ANSWER TO COMPLAINT (Cal. Rules of Court, rule 1299.04)

Please follow these instructions to complete the *Answer to Complaint or Supplemental Complaint Regarding Parental Obligations* (form 1299.04) if you do not have an attorney to represent you. Your attorney, if you have one, should complete this form.

You must file the completed answer and attachments with the court clerk within 30 days of the date you received the *Summons and Complaint* (form 1299.01). The address of the court clerk is the same as the one shown for the superior court on the *Summons and Complaint* (form 1299.01). You may have to pay a filing fee. If you cannot afford to pay the filing fee, contact the court clerk. **Keep two copies of the filed answer form and its attachments. Serve one copy on the district attorney and keep the other copy for your records. (See** *Information Sheet for Service of Process***, form 1299.05.)**

INSTRUCTIONS FOR COMPLETING THE ANSWER FORM (TYPE OR PRINT FORM IN BLACK INK):

<u>Front page, first box, top of form, left side.</u> Print your name, address, and telephone number in this box if they are not already there.

- 1. For each child listed on the answer form, you must check the "yes" box if you agree that you and the other parent are that child's parents, or check the "no" box if either the other parent or you do not think or are not sure whether you are that child's parent. You must write in the name of each child listed in the *Summons and Complaint* (form 1299.01) if your answer form does not include the names of any children.
- 2. If you have checked a "no" box in answer to number 1 above, you must request a genetic test to determine whether you or the other parent is the parent. (The test is usually a blood test.) The local child support agency will tell you when and where to go for the test. The local child support agency will pay the cost of the test now. If the court decides the test shows parentage as plead in the complaint, you may have to repay this cost to the local child support agency
- 3. a. Check this box if you agree to pay the support asked for in the proposed *Judgment Regarding Parental Obligations* (form 1299.13) that you received.
 - b. You should check this box if you do not agree to pay the support asked for in the proposed *Judgment Regarding Parental Obligations* (form 1299.13).
- 4. If you agree to pay the support asked for in the proposed *Judgment Regarding Parental Obligations* (form 1299.13), but you disagree with the proposed judgment for another reason, you should check this box and write your reasons in this space. If you have documents that prove your reasons for disagreeing with the proposed judgment, you should attach the documents to the answer form.
- 5. Check this box if you want a court hearing. The district attorney may also schedule a hearing, whether or not you have checked this box.
- 6. You must list your address and phone numbers where you can receive all notices and court dates. You must let the court know whenever your address changes. If the court does not have your current address, you may not receive important notices that affect you.

You must date the answer form, print your name, and sign the form under a penalty of perjury. When you sign the answer form, you are stating that the information you have provided is true and correct.

Instructions for completing the Proof of Service section of the answer form are in the *Information Sheet for Service of Process* (form 1299.05). The person who serves the answer and its attachments must fill out this section of the form. **You cannot serve your own answer.**

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) OR GOVERNMENTAL AGENCY (under Family Code, §§ 17400, 17404):	FOR COURT USE ONLY
GOVERNMENTAL AGENCY (under Family Code, 33 17400, 17404).	
_	
TELEPHONE NO. (Outland)	
TELEPHONE NO. (Optional): FAX NO. (Optional):	
E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name):	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	DRAFT-4
MAILING ADDRESS:	
CITY AND ZIP CODE:	
BRANCH NAME:	
PETITIONER/PLAINTIFF:	
DECDONDENT/DEFENDANT.	
RESPONDENT/DEFENDANT:	
OTHER PARENT:	
	CASE NUMBER:
FINDINGS AND ORDER AFTER CONTEMPT HEARING	
1. This matter proceeded as follows: Uncontested By stipulation	Contested
a. Date: Dept.: Judicial officer:	
b. Petitioner/Plaintiff present Attorney present (name):	
c. Respondent/Defendant present Attorney present (name):	
d. Uther parent present Attorney present (name):	
e. Governmental Agency by (name):	
f. Under appearances (specify):	
g. On the Order to Show Cause and Affidavit for Contempt	
Filed by on (date):	
2. The "Citee" for purposes of this order is Petitioner/Plaintiff Responde Other (specify):	nt/Defendant
3. a. Citee has been advised of rights to	
(1) counsel	requested waived right
(2) appointed counsel	requested waived right
(3) continuance to obtain counsel	requested waived right
(4) a hearing/trial (to cross-examine, call, and compel the attendance of	requested waived right
witnesses) (5) privilege against self-incrimination	requested waived right
(6) other (specify):	requested waived right waived right
b. Written advisement and waiver of rights attached.	
wither advisement and waiver or rights attached.	
THE COURT FINDS4. Citee knowingly, intelligently, and voluntarily waived rights as set forth in item 3.	
5. a. There are valid orders of the court as follows (specify):	
b. Citee had knowledge of the orders as follows (specify):	
c. Citee violated the orders by (specify):	
d. Citee has freely and voluntarily admitted to the defaults/violations specifid in iter e. Other (specify):	n 6.
6. Citee is guilty of contempt of court for the following counts (defaults/violations) alleg Affidavit for Contempt (specify):	ed in the Order to Show Cause and

	PETITIONER/PLAINTIFF:		CASE NUMBER:
	RESPONDENT/DEFENDANT:		
	OTHER PARENT:		
7.	a. Citee is not guilty of contempt of court for the fol Affidavit for Contempt (specify):	lowing counts (defaults/violation	s) alleged in the Order to Show Cause and
	b. Citee has a previous finding of contempt (specify	y):	
8.	Citee waived time for sentencing.		
9.	Citee failed to appear as ordered.		
10	. Other (specify):		
	IE COURT ORDERS		
11.	. Citee shall perform hours of community a. To commence on (date):	y service for counts (specify):	oted by (data):
	Citee shall report to (specify):	and to be compl	eled by (date).
	on (date):	at (time):	
	b. Citee shall pay an administrative fee of:		
12	. Citee shall serve hours in the county is	ail for counts (specify):	
12	To commence on (date):	and to be completed	d bv (date):
	Citee shall report to (specify):		
	on (date):	at (time):	
13	. Citee shall pay attorney fees in the total a	mount of: \$	payable to (specify name):
	fines in the total amount of	f: \$	
14	. Execution of sentence for	hours of community servi	ce
		hours in county jail	
	shall be suspended for a period of:	and Citee is place	d on court probation on condition that Cites
	comply with all terms and conditions of this order a	and	
	a. Comply with current support order.		
	b. Pay at least: \$	-	e to (specify name):
	a. Any remaining hours not augnessed shall be s	commencing (date	
	 c. Any remaining hours not suspended shall be s 	served as specified in flems 11 a	na 12.
15	. Citee shall seek and maintain employment and sh	all keep written records, copies	of which shall be forwarded by the
	the 5th day of each month, as follows, to the	local child support agency,	court, OR
	other (specify):		
	a. Records of efforts to gain employment shall inc		
	and/or firms contacted regarding employment:		•
	 Records of all actual employment shall include gross and net amounts of income from each el 		dates and hours worked, and the
16	1 / 1	of probation or of suspension o	f sentence in this order do not modify a
	court-ordered support obligation.		
17.	 Citee shall provide written notification to the superior co of any change of residence, income, or employment wit 		ence and to the local child support agency
18	. A wage and earnings assignment shall issue.		
19	. This matter shall be continued to (date)	at (speci	fy time)
	in court department (specify) room (specify) room (specify) compliance review. Citee is ordered to return	oecify) of the	nis court for further hearing

Page two

PETITIONER/PLAINTIFF:	CASE NUMBER:
RESPONDENT/DEFENDANT:	
OTHER PARENT:	
20. A Warrant of Attachment shall issue for Citee's arrest. Bail is set in the sum of Execution of said Warrant of Attachment is stayed until (date): at (specify court name):	\$
21. Other (specify):	
Approved as conforming to court order and findings: Date:	
	JUDICIAL OFFICER
(OLONIATI IDE OF ATTORNEY FOR OLTES)	
(SIGNATURE OF ATTORNEY FOR CITEE) SIGNATURE FO	DLLOWS LAST ATTACHMENT
Number of page	s attached:

	1290.32
GOVERNMENTAL AGENCY (pursuant to Family Code, §§ 17400, 17406):	FOR COURT USE ONLY
TELEPHONE NO.: FAX NO.:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF	
STREET ADDRESS:	
MAILING ADDRESS:	DRAFT-3
CITY AND ZIP CODE:	
BRANCH NAME:	
PETITIONER/PLAINTIFF:	
RESPONDENT/DEFENDANT: OTHER PARENT:	
OTHER PARENT.	CASE NUMBER:
SHORT FORM ORDER AFTER HEARING	
This matter proceeded as follows: Uncontested By	stipulation Contested
a. Date: Dept.:	Judicial Officer:
b. Petitioner/Plaintiff present Attorney present (name)	
c. Respondent/Defendant present Attorney present (name)	
d. Other parent present Attorney present (name)	:
e. Attorney for local child support agency present pursuant to Family Code so	ections 17400 and 17406 (name):
f. Other (specify):	
2. THE COURT FINDS , based upon the moving papers:	
•	'Obligor" in this proceeding.
b. The Obligor is	and on that basis has no ability to pay support.
c. Héanthinsurance coverage at no or reasonable cost is currently not this action.	available to the Obligor to cover the minor children in
3. THE COURT ORDERS:	
a. All orders previously made in this action shall remain in full force and effect	t except as specifically modified below.
b This matter is continued to in Dep	t.: for the following purposes only:
c. Obligor is ordered to appear on the continuance date.	
d. Child support is modified to commencing	. Any order to liquidate
arrearages is suspended until further order of the court. Obligor sha	
within 10 days of any change in income, employment status, resider the children in this action. The court shall retain jurisdiction to order	
employed.	
e. Obligor is not ordered to provide health insurance coverage for the o	
ordered to apply for and obtain health insurance coverage for the ch	ildren in this action when it becomes available at
f. Uther (specify):	
Date:	JUDICIAL OFFICER
	SOUNDIAL OF FIGURE
Approved as conforming to court order:	
ATTORNEY FOR OBLIGOR	
4. Number of pages attached:	

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): OR	FOR COURT USE ONLY	
GOVERNMENTAL AGENCY (under Family Code §§ 17400 and 17406):		
TELEPHONE NO. (Optional): FAX NO. (Optional):		
ATTORNEY FOR (Name):		
NAME OF COURT, JUDICIAL DISTRICT, AND BRANCH COURT, IF ANY:		
PLAINTIFF/PETITIONER:	∤ DRAFT-4	
DEFENDANT/RESPONDENT:		
OTHER PARENT:		
GOVERNMENTAL NOTICE AND ACKNOWLEDGMENT OF RECEIPT	CASE NUMBER:	
To (name of person served):		
NOTICE		
The documents described below are being served on you by mail with this acknowledgment form. If you are being served on behalf of a corporation, an unincorporated association (including a partnership), or another entity, you must sign this acknowledgment in the name of the entity, or a person authorized to receive service of process on behalf of the entity must sign the form to acknowledge receipt of the documents. In all other cases, you must personally sign, or a person authorized by you must sign, this form to acknowledge receipt of the documents.		
If the documents described below include a summons and you fail to complete and return within 20 days of the date of mailing, you shall be liable for the reasonable expenses incurattempting to serve you by any other methods permitted by law. If you return this form to t deemed complete on the date you sign the acknowledgment of receipt below.	red after that date in serving you or in	
Date of mailing:		
•		
(TYPE OR PRINT NAME)	(SIGNATURE OF SENDER)	
ACKNOWLEDGMENT OF RECEIPT		
 This acknowledges receipt of the following (to be completed by sender before mailing): 1. A copy of the Summons and Complaint (form 1299.01) and a blank Answer to Complaint or Supplemental Complaint Regarding Parental Obligations (form 1299.04). 		
 2. A copy of the Summons with standard restraining orders, and (a) an Order to Show Cause (form 1285) and a blank Responsive Declaration (b) a completed and a blank Income and Expense Declaration (form 1285.50) 	· · · · · · · · · · · · · · · · · · ·	
3. Other documents (describe):		
(To be completed by recipient) Date this acknowledgment is signed:		
	PERSON ACKNOWLEDGING RECEIPT, WITH TITLE IF	